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December 28, 2005

From: Curtis A. Vock

Matter No.: 440334

To:	Company:	Fax Number:	Phone Number:
Mail Stop: RCE, Attn: Examiner Green	U.S. Patent Office	(571) 273-8300	

Number of Pages Transmitted (including this cover sheet): 18

Message:

Applicant	Matthew Jay	Examiner	Brian Green
Serial No.	10/749,545	Group Art No.	3611
Filed	31 December 2003	Confirmation No.	8827
For	MEDIA DISPLAY SYSTEM FOR SKI-LIFT CHAIR		

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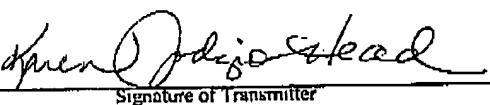
Fax Attendant: Karen

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DEC 28 2005

CERTIFICATE OF FACSIMILE TRANSMISSION 37 CFR 1.8			Matter No.
Applicant(s): Matthew Jay			440334
Serial No.	Filing Date	Examiner	Group Art Unit
10/749,545	December 31, 2003	Brian Green	3611
Invention	Media Display System For Ski-Lift Chair		
<p>I hereby certify that the following: Facsimile Cover Sheet (1 page); Request For Continued Examination (RCE) Transmittal (1 page in duplicate); Amendment And Response (10 pages); Fee Transmittal for FY 2005 (1 page in duplicate); Petition For Extension of Time Under 37 CFR 1.136(a) (1 page in duplicate); authorization to charge Deposit Account No. 12-0600 in the amount of \$670.00 (\$395 for the RCE fee, \$225 for the extension fee and \$50 for extra claim fee); authorization to charge additional fees that may be required, or credit any overpayment, to Deposit Account No. 12-0600; are being sent via facsimile transmission to Mail Stop: RCE, c/o the Commissioner For Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on this 28th day of December, 2005</p>			
<u>Karen Jodzio-Head</u> <small>Name of Transmitter</small>			
 <small>Signature of Transmitter</small>			
<hr/> <small>(571) 273-8300</small> <small>Faximile No.</small>			

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Effective on 12/08/2004.
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

FEE TRANSMITTAL for FY 2005

Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$ 50.00)

Complete If Known

Application Number	10/749,645	RECEIVED
Filing Date	December 31, 2003	
First Named Inventor	Matthew Jay	CENTRAL FAX CENTER
Examiner Name	Brian Green	
Art Unit	3611	DEC 28 2005
Attorney Docket No.	440334	

METHOD OF PAYMENT (check all that apply)

Check Credit Card Money Order None Other (please identify) : _____

Deposit Account Deposit Account Number: 12-0600 Deposit Account Name: LATHROP & GAGE LC

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

Charge fee(s) indicated below

Charge fee(s) indicated below, except for the filing fee

Charge any additional fee(s) or underpayments of fee(s)

Credit any overpayments

Under 37 CFR 1.16 and 1.17

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FEE CALCULATION

1. BASIC FILING, SEARCH, AND EXAMINATION FEES

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES	
	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)
Utility	300	150	500	250	200	100
Design	200	100	100	50	130	65
Plant	200	100	300	150	160	80
Reissue	300	150	500	250	600	300
Provisional	200	100	0	0	0	0

Small Entity

Fee (\$)	Fee (\$)
50	25
200	100
360	180

Multiple Dependent Claims

Fee (\$)	Fee Paid (\$)
—	—

2. EXCESS CLAIM FEES

Fee Description

Each claim over 20 (including Reissues)

Each independent claim over 3 (including Reissues)

Multiple dependent claims

Total Claims	Extra Claims	Fee (\$)	Fee Paid (\$)	Fee (\$)	Fee (\$)
22	-20 or HP= 2	x \$25	= \$50	—	—

HP = highest number of total claims paid for, if greater than 20.

Indep. Claims	Extra Claims	Fee (\$)	Fee Paid (\$)	Fee (\$)	Fee Paid (\$)
2	- 3 or HP= 0	x \$100	= \$0	—	—

HP = highest number of independent claims paid for, if greater than 3.

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
—	- 100 =	/ 50 = (round up to a whole number) x	=	Fee Paid (\$)

4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge) : _____

SUBMITTED BY

Signature	<i>Curtis A. Vock</i>	Registration No. (Attorney/Agent)	38,356	Telephone	(720) 831-3011
Name (Print/Type)	Curtis A. Vock			Date	December 28, 2005

This collection of information is required by 37 CFR 1.138. The information is required to obtain or retain a benefit by the public which is to be made available (and by the USPTO to process) on application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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<small>Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).</small>		<i>Complete if Known</i>	
		Application Number	10/749,545
		Filing Date	December 31, 2003
		First Named Inventor	Matthew Jay
		Examiner Name	Brian Green
		Art Unit	3811
		Attorney Docket No.	440334
FEETRANSMITTAL for FY 2005		RECEIVED CENTRAL FAX CENTER DEC 28 2005	
<input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27			
TOTAL AMOUNT OF PAYMENT (\$ 50.00)			

METHOD OF PAYMENT (check all that apply)

- Check Credit Card Money Order None Other (please identify) : _____
- Deposit Account Deposit Account Number: 12-0500 Deposit Account Name: LATHROP & GAGE LC
- For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)
- Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee
- Charge any additional fee(s) or underpayments of fee(s) Credit any overpayments
- Under 37 CFR 1.16 and 1.17

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FEES CALCULATION**1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

<u>Application Type</u>	<u>FILING FEES</u>		<u>SEARCH FEES</u>		<u>EXAMINATION FEES</u>		<u>Fees Paid (\$)</u>
	<u>Small Entity</u>	<u>Fee (\$)</u>	<u>Small Entity</u>	<u>Fee (\$)</u>	<u>Small Entity</u>	<u>Fee (\$)</u>	
Utility	300	150	500	250	200	100	_____
Design	200	100	100	50	130	65	_____
Plant	200	100	300	150	160	80	_____
Reissue	300	150	500	250	600	300	_____
Provisional	200	100	0	0	0	0	_____

2. EXCESS CLAIM FEESFee Description

Each claim over 20 (including Reissues)

Each independent claim over 3 (including Reissues)

Multiple dependent claims

<u>Total Claims</u>	<u>Extra Claims</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>	<u>Small Entity</u>	
				<u>Fee (\$)</u>	<u>Fee (\$)</u>
22	-20 or HP= 2	x \$25	= \$50	50	25
				200	100

HP = highest number of total claims paid for, if greater than 20.

<u>Indep. Claims</u>	<u>Extra Claims</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>	<u>Multiple Dependent Claims</u>	
				<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>
2	- 3 or HP= 0	x \$100	= \$0	—	—
				—	—

HP = highest number of independent claims paid for, if greater than 3.

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<u>Total Sheets</u>	<u>Extra Sheets</u>	<u>Number of each additional 50 or fraction thereof</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>
—	- 100 =	/ 50 = (round up to a whole number) x	=	<u>Fees Paid (\$)</u>

4. OTHER FEE(S)

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Other, (e.g., late filing surcharge) : _____

SUBMITTED BY

Signature	<i>Curtis A. Vock</i>	Registration No. (Attorney/Agent)	38,358	Telephone	(720) 631-3011
Name (Print/Type)	Curtis A. Vock	Date	December 28, 2005		

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